12030920542

STATEMENT OF

FORM 1					Office Use Only			
NAME OF COMMITTEE (iii	n full)	(Check if is changed		xample:If typing, type ver the lines.	12FE4M			
KANSAS	IORSI	E ASSOC	IATION			11111		
		450401				<u></u>	ليبيب	
ADDRESS (number a	nd street)	1504 S. I	louston	Street		11111	للسلب	
(Check if address is changed)		Kaufman			TX	75142		
			CITY		STATE	ZIP CO	ODE	
COMMITTEE'S E-MA	address			address) ion@gmail.	çom ,			
COMMITTEE'S WEB (Check if is change	address		orseass	ociation.tun	pblr _r com			
2. DATE 10) "] ′ [9]	2012	- :					
3. FEC IDENTIFIC	CATION NU	MBER	C 0052	26806				
4. IS THIS STATE	MENT	NEW (N)	OR	AMENDED (A)				
I certify that I have	examined the	is Statement and to	the best of m	y knowledge and belie	ef it is true, corre	ct and complete.		
Type or Print Name	of Treasurer	Julie Ca	ramant	e				
Signature of Treasur	er <u> </u>	Julie	Cara	marti	Date 1	0 (09)	2012 `	
NOTE: Submission of		-	-	subject the person signing HOULD BE REPORTED	•		2 U.S.C. §437g.	
Office Use				For further information Federal Election Community Toll Free 800-424-9530	nission	FEC FO	•	